

C.L. CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DECEASE OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P.O. Box 4072, Odessa, Texas 79760	9. Well No. 11
4. Location of Well UNIT LETTER <u>A</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>East</u> LINE, SECTION <u>6</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether DF, RT, GR, etc.) 3628 DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

MI and RUSU 9-1-87 to acidize well to increase injectivity. Release packer and pull injection tubing and packer. Run workstring and PPIP with 2 foot spacing and acidize from 4127'-30', 4130'-46' and 4154'-64' with 4350 gallons of 20% NE HCl. Lay down workstring and run injection tubing and packer. Pump packer fluid and set packer at 3822'. Test packer and casing to 500 PSI for 30 minutes and test OK. RD and MOSU and return to injection 9-3-87.

IPWO: 1510 BWIPD at 400 PSI
IAWO: 2396 BWIPD at 0 PSI

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>O. M. Mitchell</u>	TITLE <u>Sr. Admin. Analyst</u>	DATE <u>9-11-87</u>
<u>Eddie W. Seay</u>		
APPROVED BY <u>Oil & Gas Inspector</u>	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

SEP 17 1987

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SEP 16 1987
OCD
HOBBS OFFICE